

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Cruz for President**

**A. Full Name (Last, First, Middle Initial)**

**MR. RICHARD J. ROSENSTOCK**

Mailing Address 3700 SOUTH OCEAN BLVD, APT 1503

City	State	Zip Code
HIGHLAND BEACH	FL	33487-3377

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LADENBURG THALMANN**

Occupation  
**FINANCIAL CONSULTANT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17.855764**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		28		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**B. Full Name (Last, First, Middle Initial)**

**YAAKOV ROSENBLATT**

Mailing Address 6263 LAFAYETTE WAY

City	State	Zip Code
DALLAS	TX	75230-1817

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**BUSINESS**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

**Transaction ID : SA17.852216**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		28		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

840.00

**C. Full Name (Last, First, Middle Initial)**

**MR. DAVID R. ROSS**

Mailing Address 37 WEST LANCASTER AVE

City	State	Zip Code
READING	PA	19607-1855

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**AMERICAN INSURING GROUP**

Occupation  
**INSURANCE AGENT**

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

**Transaction ID : SA17.862795**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		28		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**Subtotal Of Receipts This Page (optional)**.....

1340.00

**Total This Period (last page this line number only)**.....